

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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| UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</small> | Attorney Docket No. | 3037.1004-001 |
| | First Named Inventor or Application Identifier | Stacey J. Bell |
| | Express Mail Label No. | EL552572197US |

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| Title of Invention | NUTRITIONAL SUPPLEMENT TO ALLEVIATE SYMPTOMS ASSOCIATED WITH REDUCED LEVELS OF SEROTONIN |
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| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231 |
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| 1. <input type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total Pages 21] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to microfiche Appendix - Background of the Invention - Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets []] <input type="checkbox"/> Formal <input type="checkbox"/> Informal <input type="checkbox"/> Fig. of the Drawings for Publication <input type="checkbox"/> 4. <input type="checkbox"/> Oath or Declaration/POA [Total Pages []] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> [NOTE Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | 6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i> 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) [] Pages c. <input type="checkbox"/> Statement verifying identity of above copies <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) <input checked="" type="checkbox"/> Assignee - Functional Foods, Inc. Belmont, MA 02178 9. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request <i>(check parent application)</i> 17. <input type="checkbox"/> Other: </div> |
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| 18. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/783,709 Prior application information: Examiner: Group Art Unit: | | | |
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| 19. CORRESPONDENCE ADDRESS | | | | | |
| NAME | Alice O. Carroll, Esq. | | | | |
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|---------------------------------------|------------------|-------------|----------------|
| Signature | | Date | March 23, 2001 |
| Submitted by Typed or Printed Name | Alice O. Carroll | Reg. Number | 33,542 |